MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1				51							
2		1		1			52							
3		2		1			53							
4		0		1			54							
5		0		1			55							
6		0		1			56							
7		0		1			57							
8		0		1			58							
9		0		1			59							
10		0		1			60							
11		0		1			61							
12		0		1			62							
13	1						63							
14							64							
15							65							
16							66							
17							67							
18							68							
19							69							
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42							92							
43							93							
44							94							
45							95							
46							96							
47							97							
48							98							
49							99							
50							100							
TOTAL IND.							TOTAL IND.							
TOTAL DEP.		1					TOTAL DEP.							
TOTAL CLAIMS		11					TOTAL CLAIMS							
		14												